Edgar Filing: ASSURANT INC - Form 4

A COLID A NIT INC

Form 4	INC										
December 11											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB OMB Number:	Number: 3235-0287 Expires: January 31 Estimated average burden hours per response 0.5		
Check thi if no long subject to Section 10 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	er STATEM 6. Filed pur ¹⁸ Section 17(a	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section									
(Print or Type R	Responses)										
			2. Issuer Name and Ticker or Trading Symbol ASSURANT INC [AIZ]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) ASSURANT, INC., ONE CHASE MANHATTAN PLAZA, 41 FL.			3. Date of Earliest Transaction (Month/Day/Year) 12/09/2012					Director 10% Owner X Officer (give title Other (specify below) below) EVP, CIO & Treasurer			
				nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
(City)		(Zip)	Tabl	a I Non D	orivotivo	Soour	itios A ca	Person uired, Disposed of	or Bonoficial	ly Ownod	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	ned	3. Transactio Code (Instr. 8)	4. Securi	ties Ad spose 4 and (A)	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
Common Stock	12/09/2012			Code V F	Amount 461	or (D) D	Price \$ 34.81	(Instr. 3 and 4) 65,375.1 (1)	D		
Common Stock								3,614.801	I	Through 401 (k) Plan	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration I (Month/Day e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships						
		ector	10% Owner	Officer	Other			
Pagano Christopher J ASSURANT, INC. ONE CHASE MANHATTAN PLAZA, 4 NEW YORK, NY 10005	FL.			EVP, CIO & Treasurer				
Signatures								
Paulette Lang 12/11 Attorney-in-Fact	/2012							

**Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) Includes restricted stock units.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.